



Wisconsin Deafblind Technical Assistance Project

124 2nd St. Rm 35
Baraboo, WI 53913
www.wdbtap.wi.gov

Utah State University Online Training Program in Deafblindness

An online training program in deafblindness is now available through Utah State University (USU). WDBTAP is extending the opportunity to take this coursework to selected professionals, paraprofessionals and parents/guardians in Wisconsin. Applicants chosen for the training will be reimbursed for the noncredit option fees upon successful completion of the course with a grade of 'C' or better. To be eligible for this program, please complete the application below and return it to Jolene Gruber, Grant Coordinator, at the above address.

SCHOLARSHIP APPLICATION FOR ONLINE TRAINING PROGRAM

Name: _____

School Address (if school employee): _____

Summer Address: _____

School Email (if school employee): _____

Personal Email: _____

School Phone (if school employee): _____

Personal Phone: _____

Please complete the following (circle one):

1. I am eligible for the program because I:

- a. work as a teacher with a DB child on a regular basis
- b. am a paraprofessional working with a DB child
- c. Other (please explain) _____

2. I would like to take the class for:

- a. USU - Noncredit Basis (\$110/credit hour; reimbursed by WDBTAP)
- b. USU - Undergraduate Credits (\$211/credit hour; difference paid by applicant)
- c. USU - Graduate Credits (\$268/credit hour; difference paid by applicant)

3. Please briefly describe your reasons for applying for this program. How do you hope it will enhance your work?

4. Please review each stipulation below and initial your understanding and agreement:

_____ I certify that it is my intention to finish all of the classes that are required as part of the **3-semester** Utah State University Online Training Program in Deafblindness.

_____ I acknowledge that it is my responsibility to register for the coursework, pay all initial costs, and meet all registration/payment deadlines.

_____ I understand that it is my responsibility to submit all required paperwork to receive reimbursement as provided by WDBTAP at the end of each semester. Paperwork includes:

- **transcript reflecting passing grade of ‘C’ or better**
- receipt for **proof of payment**
- DPI claim for reimbursement (request from WDBTAP)
- W-9 form (request from WDBTAP)

_____ I understand that I am responsible for any fees incurred beyond the noncredit basis fee, should I choose to apply for undergraduate or graduate credits through the Utah State University Online Training program in deafblindness. I understand that I will not be reimbursed by WDBTAP for any undergraduate or graduate credit fees.

_____ I agree and acknowledge that I **will** attend the annual WESP-DHH Family Conference and assist in the deafblind childcare room **November 11 - 12, 2016**. The Family Conference registration fee will be waived for you.

Printed Name: _____

Signature: _____ Date: _____

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• Jolene Gruber, Grant Coordinator
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• Jodi Anderson, Family Specialist
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